Image# 14978173804 PAGE 1 / 12

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	- Cuioi inan 7	III Autilionize				Office Use Only
NAME OF TOMMITTEE (in full)	YPE OR PRINT ▼		mple: If typir r the lines.	ng, type	12FE4M5	
PHARMACEUTICAL CARE	MANAGEMEN	Γ ASSOCIAT	ION POLIT	ICAL ACT	ION COMM	ITTEE (PCMA PAC)
ADDRESS (number and street)	601 PENNSYLVAN	A AVENUE NW	STE 740			
Check if different						
than previously reported. (ACC)	WASHINGTON				DC	20004
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦			STATE <b></b>	ZIP CODE ▲
C C00388819		3. IS THIS REPORT		IEW N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On.	Mar 20 (M3)		lun 20 (M6)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1	) (c) 12-Day	Apr 20 (M4)		Jul 20 (M7)	General (	20 (M10) Jan 31 (YE) 12G) Runoff (12R)
July 15 Quarterly Report (Q2	PRF-Fled		Primary (12P Convention (		Special (	
October 15 Quarterly Report (Q3			(	,	(	-,
January 31 Year-End Report (YE		Election on	M = M /	D   D /	Y W Y W Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Ele Report fo		General (300	a)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Tiopoit io	Election on	M M /	D   D /	Y = Y = Y = Y	in the State of
5. Covering Period 07	/ D D / Y	2014	through	M M	30	2014
I certify that I have examined this		best of my kno	wledge and b	pelief it is tru	ie, correct and	I complete.
Type or Print Name of Treasurer	Jonathan Heafitz					
Signature of Treasurer	an Heafitz		[Electronically	Filed]	Date 10	/ D D / Y Y Y Y Y Y 13 2014
NOTE: Submission of false, erroned	ous, or incomplete inf	ormation may su	bject the pers	son signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

01 09 30 2014 Report Covering the Period: 07 2014 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 5175.12 January 1, 2014 (b) Cash on Hand at 6925.88 Beginning of Reporting Period..... 37895.33 4494.57 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 11420.45 43070.45 6(a) and 6(c) for Column B)..... 7250.00 38900.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 4170.45 4170.45 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:	Total IIIIS FEIIOU	Jaienaa Tear-to-Date
(a) Individuals/Persons Other		
Than Political Committees	4400.07	12222 02
(i) Itemized (use Schedule A)	4162.27	12233.03
(ii) Unitemized	332.30	662.30
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	4494.57	12895.33
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	25000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	4404 57	27005 22
Totals to Line 33, page 5)	4494.57	37895.33
12. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		0.00
16. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts	0.00	3.00
(Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin F		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	0.00	
(b) Levin Funds (from Schedule H5)		0.00
(c) Total Transfers (add 18(a) and 18(b)	0.00	0.00
(c) Total Transiers (and Tota) and Total	, J. J	0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	4494.57	37895.33
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	4494.57	37895.33
(322.22. 2 10(0) 110111 2110 10)	7	51 555.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period					
Operating Expenditures:  (a) Allocated Federal/Non-Federal		Calendar Year-to-Date				
Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating  Expenditures	0.00	0.00				
(c) Total Operating Expenditures	0.00	0.00				
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00				
Transfers to Affiliated/Other Party						
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees						
and Other Political Committees	7250.00	38900.00				
Independent Expenditures	0.00	0.00				
(use Schedule E)  Coordinated Party Expenditures	0.00	0.00				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
(use scriedule i )		0.00				
Loan Repayments Made	0.00	0.00				
,,,,,						
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other						
Than Political Committees	0.00	0.00				
	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00					
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	0.00	0.00				
F						
Other Disbursements	0.00	0.00				
	,	,				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity (from Schedule H6)						
(i) Federal Share	0.00	0.00				
(i) I cociai chare						
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely						
With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add						
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
T. I.B. I.						
Total Disbursements (add Lines 21(c), 22,	7070 00					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7250.00	38900.00				
Total Federal Disbursements	<del></del>					
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	7250.00	38900.00				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 4494.57 37895.33 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 4494.57 37895.33 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b)) ........▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 0.00 0.00 (subtract Line 37 from Line 36) .....

#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR L	INE NU	JMBER	:	PAGE	6	OF	12
(check	only or	ne)					
X 1	1a	11b		11c	12		
13	3	14		15	16		17

NAME OF COMMITTEE (In Full)	GEMENT ASSOCIATION POLITICAL	
Full Name (Last, First, Middle Initial)  Kristin Bass  Mailing Address 812 N. Jackson St  City	State Zip Code	Date of Receipt  07 15 2014  Transaction ID: SA11AI.4938
Arlington	VA 22201	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer  Pharmaceutical Care Mgmt Assoc  Receipt For:  Primary  General	Occupation SVP  Aggregate Year-to-Date ▼	
Other (specify) ▼  Full Name (Last, First, Middle Initial)	2500.03	
Mailing Address 2804 9th Street S		Date of Receipt  07 15 2014
City Arlington	State Zip Code VA 22204	Transaction ID : SA11AI.4941  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	280.00
Name of Employer PCMA	Occupation Policy Analyst	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1920 12th Street Unit 2		07 15 2014
City Washington	State Zip Code DC 20009	Transaction ID : SA11AI.4946  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	673.05
Name of Employer	Occupation	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 673.05	
SUBTOTAL of Receipts This Page (optional)		2299.22
TOTAL This Period (last page this line numbe	<u>_</u>	

#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	LINE	NU	MBER	:	PAGE	7	OF	12
(che	ck only	or	ne)					
X	11a		11b		11c	12	2	
	13		14		15	16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Jonathan Heafitz Mailing Address 2704 Emmet Road		Date of Receipt
City	State 7in Code	07 15 2014
Silver Spring	State Zip Code MD 20902	Transaction ID : SA11AI.4948
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
PCMA	Sr Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Barbara Levy	'	Date of Receipt
Mailing Address 522 N.Alfred Street		M = M / D = D / Y = Y = Y
City	State Zip Code	07 15 2014
Alexandria	VA 22314	Transaction ID : SA11AI.4950  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	140.00
Name of Employer PCMA	Occupation Assist VP State Affairs and GC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial)		5. (5
Brian McCarthy  Mailing Address 1922 37th Street		Date of Receipt  07 15 2014
City Washington	State Zip Code DC 20007	Transaction ID : SA11AI.4952  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	875.00
Name of Employer	Occupation	
PCMA	Assist VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1475.00	

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	_		_	MBER	:	PAGE	:	8	OF	12
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than usi	ng the name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MA	NAGEMENT ASSOCIATION POLITICAL A	CTION COMMITTEE (PCMA PAC)				
Full Name (Last, First, Middle Initial)  1. Jerry Steiffl		Date of Receipt				
Mailing Address 1401 North Oad St #990		07 15 2014				
City	State Zip Code	Transaction ID : SA11AI.4954				
Arlington	VA 22209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	673.05				
Name of Employer	Occupation					
Pharmaceutical Care Mgmt Assoc	VP					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.95					
Full Name (Last, First, Middle Initial)  3.		Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	City State Zip Code					
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period				
Name of Employer	Occupation					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	Amount of Each Heceipt this Period				
Name of Employer	Occupation					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (option	nal)	673.05				
	mber only)	4162.27				

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 9 OF 12
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one)
	Detailed Summary Page	21b	22 🗙 23 24 25 26
Г		27	28a 28b 28c 29 30b
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full)			
$ \; angle$ PHARMACEUTICAL CARE MANAGE	MENT ASSOCIATION F	POLITICAL A	CTION COMMITTEE (PCMA PAC)
Full Name (Last, First, Middle Initial)			
A. BERGER FOR CONGRESS			Date of Disbursement
" BERGER FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address PO BOX 3117			07 14 2014
City	State Zip Code		Transaction ID : SB23.4901
EDEN	NC 27289		Transaction 15 1 552511001
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Feriod
PHILIP EDWARD JR BERGER		Category/ Type	250.00
	sement For: 2014	71	,
Senate	Primary General		
President	Other (specify)      ▼		
State: NC District: 06	Runoff		
Full Name (Last, First, Middle Initial)			
B. CRENSHAW FOR CONGRESS	CAMPAIGN		Date of Disbursement
Mailing Address 7235 BONNEVAL ROAD			09 29 2014
SUITE 210			09 29 2014
City	State Zip Code		Transaction ID : SB23.4926
JACKSONVILLE	FL 32256		Transaction ib . 3D23.4320
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Penou
ANDER CRENSHAW		Category/ Type	250.00
	ement For: 2014	1,750	
Senate	Primary General		
President	Other (specify) ▼		
State: FL District: 04			
Full Name (Last, First, Middle Initial)			
c. FRIENDS OF DAVID SCHWEIKE	ERT		Date of Disbursement
Mailing Address 228 S WASHINGTON STREET			07 14 2014
STE 115			2011
City	State Zip Code		Transaction ID : SB23.4904
ALEXANDRIA	VA 22314		Transaction ib . 3623.4304
Purpose of Disbursement			
Candidate Name			Amount of Each Disbursement this Period
DAVID SCHWEIKERT		Category/ Type	500.00
	sement For: 2014	Турс	7
Senate	Primary General		
President	Other (specify)		
State: AZ District: 06			
SUBTOTAL of Disbursements This Page (optional	)		1000.00
TOTAL TIL B			
TOTAL This Period (last page this line number on	ly)	•••••••••••••••••••••••••••••••••••••••	

SCHEDULE B			FOR LINE NUMBER: PAGE 10 OF 12										
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						27	28a		28b	28	Вс	29	30
	from such Reports and Staten												
\	oses, other than using the nam	e and addr	ess of any polition	cal com	nmitte	e to s	solicit co	ntribu	tions	from	such c	ommit	tee.
NAME OF COMMIT	,	-N-T 400					TION		48 417		<b>(DO</b> )		
	TICAL CARE MANAGEM	ENT ASS	OCIATION P	OLIT	ICA	L AC	TION	COV	ИМΙΤ	TEE	(PCI	MA P	AC)
Full Name (Last, Fir	ret Middle Initial)												
•	PAT TOOMEY						Date o	f Dist	oursei	nent			
I KILINDO OI	TATTOOMET						M M		D	D /	Y	Y	Υ
Mailing Address 228	S. WASHINGTON ST., SUITE	115					09 29 2014						
City	5	State	Zip Code				Trans	sactio	n ID	SB23	3.4932		
ALEXANDRIA  Purpose of Disburse	ament	VA	22314			_							
i dipose oi bisbuise	Smont			г.		71	Amoun	t of E	ach l	Disbur	semen	t this	Period
Candidate Name				0-4									
PATRICK J T	OOMEY				egory ype	′					,	1000	0.00
Office Sought:	≺ House Disbursen	nent For: 2	014								,		
	Senate	Primary	General										
	President	Other (spec	cify) 🔻										
	histrict: 15					_							
Full Name (Last, Fir	•						Doto	f Dick		mant			
B. HUDSON FO	· HUDSON FOR CONGRESS						Date o						
Mailing Address PC	) BOX 5053					-	M = M	/	29			2014	Y
Maining Address 1	DOX 3033						00		-			.011	
City	9	State	Zip Code				Trans	sactio	n ID	· SB2	3.4935		
CONCORD		NC	28027				man	sactic	,,,,	. 002.	J. <del>4</del> 333		
Purpose of Disburse	ement			_		71	Amoun	t of E	oob I	Diobur	oomon	t thio	Dorind
Candidate Name					_	41	Amoun	I OI E	acii	Disbui	Semen	t tills	renou
	JR. HUDSON				egory /pe	/	Ι.					25	0.00
Office Sought:		nent For: 2	2014	-,	7 0 0	$\overline{}$		,					
		Primary	✓ General										
	President	Other (spec	eify) 🔻										
State: NC D	istrict: 08												
Full Name (Last, Fir	•												
c. JOE KENNEI	DY FOR CONGRESS						Date o	f Disk	oursei	nent			
Mailing Address PC	DOV 500464					-	м = м 07	/	14			014	Υ
Mailing Address PC	DOX 590404						U1		- 1-			014	
City	Ç	State	Zip Code				T		ID	. CDO	1000		
NEWTON		MA	02459				irans	sactio	טו no	: 5B2.	3.4908		
Purpose of Disburse	ement				_	7							
Candidate Name						_	Amoun	t of E	ach I	Disbur	semen	t this	Period
JOSEPH P II	I KENNEDV				egory	/						500	0.00
Office Sought:		nent For: 2	014	1)	/pe	-					7		
Z2 23.81.11		Primary	General										
	_   _	Other (spec											
State: MA	vistrict: 04					_							
	4							-	_	_	-	-	
SUBTOTAL of Disburs	sements This Page (optional)					<b>•</b>					7	1750	.00
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TOTAL This Period (la	ast page this line number only)						1 .	1 4				1 4	

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J1	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 11 OF 12
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)
			Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Ar	ny information copied from such Reports and Staten	nents may	not be sold or use		
	for commercial purposes, other than using the name				
$\setminus$	NAME OF COMMITTEE (In Full)				
$ \rangle$	PHARMACEUTICAL CARE MANAGEM	ENT AS	SOCIATION P	OLITICAL A	CTION COMMITTEE (PCMA PAC)
<u></u>	Full Name (Last, First, Middle Initial)				
A.	KURT SCHRADER FOR CONGRE	ESS			Date of Disbursement
	Maria Additional Company				M M / D D / Y Y Y Y
	Mailing Address PO BOX 3314				09 29 2014
	City	State	Zip Code		
	OREGON CITY	OR	97045		Transaction ID : SB23.4923
	Purpose of Disbursement				Amount of Fook Dishuronment this Davied
	Candidate Name			البيا	Amount of Each Disbursement this Period
	KURT SCHRADER			Category/ Type	1000.00
		nent For:	2014		,
	Senate	Primary	Meneral Control		
	State: OR District: 05	Other (spe	cify) 🔻		
_	Full Name (Last, First, Middle Initial)				
В.	MIKE KELLY FOR CONGRESS				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address PO BOX 476				07 08 2014
	,	State	Zip Code		Transaction ID : SB23.4956
	LYNDORA Purpose of Disbursement	PA	16045		
	·				Amount of Each Disbursement this Period
	Candidate Name			Category/	1000.00
	GEORGE KELLY Jr.			Type	1000.00
		nent For: Primary	2014 General		
		Other (spe			
	State: PA District: 03		•		
Τ	Full Name (Last, First, Middle Initial)				
C.	ROTHFUS FOR CONGRESS				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address PO BOX 435				09 29 2014
	Mailing Address PO BOX 435				09 29 2014
	City	State	Zip Code		7 29 2014 2014 Transaction ID : SB23.4929
	City S SEWICKLEY	State PA	Zip Code 15143		
	City				Transaction ID : SB23.4929
	City SEWICKLEY Purpose of Disbursement  Candidate Name			Category/	Transaction ID : SB23.4929  Amount of Each Disbursement this Period
	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS	PA	15143	Category/ Type	Transaction ID : SB23.4929
	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought: House Disbursen	PA nent For:	15143		Transaction ID : SB23.4929  Amount of Each Disbursement this Period
	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought: House Senate	nent For:	15143  2014  General		Transaction ID : SB23.4929  Amount of Each Disbursement this Period
	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought: House Disbursen	PA nent For:	15143  2014  General		Transaction ID : SB23.4929  Amount of Each Disbursement this Period
	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought: House Senate President  Disburser	nent For:	15143  2014  General		Transaction ID : SB23.4929  Amount of Each Disbursement this Period 1000.00
s	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought: House Senate President  Disburser	nent For: Primary Other (spe	15143 2014	Type	Transaction ID : SB23.4929  Amount of Each Disbursement this Period
H	City SEWICKLEY Purpose of Disbursement  Candidate Name KEITH MR. ROTHFUS  Office Sought:    House   Disburser	nent For: Primary Other (spe	15143  2014	Type	Transaction ID : SB23.4929  Amount of Each Disbursement this Period 1000.00

Transaction ID: SB23.491   Septice   Septic	SCHEDULE B (FEC Form 3X)	11	FOR LINE I	NUMBER: PAGE	12 OF 12
Amount of Each Disbursement this Period  Category Type  Mailing Address PO BOX 1400  City  Mailing Address PO BOX 1400  City  STEVE ISRAEL FOR CONGRESS COMMITTEE  Mailing Address PO BOX 1400  City  Millor Sought:  Millor	ITEMIZED DISBURSEMENTS		(check only 21b	one) 22 X 23 24	_
NAME OF COMMITTEE (in Full) PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)  Full Name (Last, First, Middle Initial) STEVE ISRAEL FOR CONGRESS COMMITTEE  Mailing Address P.O. BOX 3157  City  State: Zip Code NJ 07740  Transaction ID : SB23.4917  Amount of Each Disbursement this Period  Cardidate Name Sanate State: NJ District: 06  Full Name (Last, First, Middle Initial) STEVE ISRAEL FOR CONGRESS COMMITTEE  Mailing Address PO BOX 1400  City  MELVILLE  MELVILLE  MELVILLE  MELVILLE  Melvince Sought: Disbursement For: 2014  Candidate Name STEVE J. ISRAEL  Office Sought: Other (specify)  Melvince Sought: Other (specify)  Melvince Sought: Disbursement For: 2014  Cardidate Name  STEVE J. ISRAEL  Office Sought: Other (specify)  Melvince Sought: Disbursement For: 2014  Cardidate Name  Cardidate N					
Mailing Address P.O. BOX 3157  City State Zip Code NJ 07740 Purpose of Disbursement  Candidate Name President State: NY 11747 Purpose of Disbursement  Candidate Name President State: NY District: 03  Full Name (Last, First, Middle Initial)  STEVE J. SRAEL  Office Sought: House Senate Prisadent NY 11747  Purpose of Disbursement  Category/ Type  Category/ Type  Date of Disbursement  Transaction ID : SB23.4917  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Transaction ID : SB23.4917  Amount of Each Disbursement this Period  Category/ Type  Transaction ID : SB23.4920  Amount of Each Disbursement this Period  Category/ Type  Category/ Ty	NAME OF COMMITTEE (In Full)				
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Candidate Name FRANK JR PALLONE  Office Sought:	LONG BRANCH			Transaction ID : SB23.4917	
FRANK JR PALLONE  Office Sought: House Senate Primary General President State: NJ District: 06  Full Name (Last, First, Middle Initial)  STEVE J. ISRAEL Office Sought: President Primary General Primary Gen	Purpose of Disbursement		· · · ·	Amount of Each Disbursemen	t this Period
Senate President Other (specify)  State: NJ District: 06  Full Name (Last, First, Middle Initial)  STEVE ISRAEL FOR CONGRESS COMMITTEE  Mailing Address PO BOX 1400  City State Zip Code NY 11747  Purpose of Disbursement  STEVE J. ISRAEL  Office Sought: House Senate President Other (specify)  State Zip Code NY 11747  Full Name (Last, First, Middle Initial)  State: NY District: 03  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement Tippe  Office Sought: Senate President Other (specify)   Transaction ID: SB23.4920  Amount of Each Disbursement this Period  Amount of Each Disbursement Tippe  Other (specify)   Office Sought: Senate President Other (specify)   State: Disbursement Tippe  Office Sought: Office Sought: Office Sought: Other (specify)   State: Disbursement Tippe  Office Sought: Office Sought: Other (specify)   State: Disbursement Tippe  Office Sought: Office Sought: Other (specify)   State: Disbursement Tippe  Office Sought: Other (specify)   State: Disbursement Tippe  Office Sought: Other (specify)   State: Disbursement Tippe  Office Sought: Other (specify)   Islate: Other (specify)	FRANK JR PALLONE				1000.00
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Date of Disbursement    Date of Disbursement					
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MELVILLE Purpose of Disbursement  Candidate Name STEVE J. ISRAEL Office Sought: Senate Prissident State: NY District: 03  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Disbursement For: 2014 Primary General Other (specify)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: Senate Primary General Other (specify)  State: District:  Substitut:  Substitut:  Substitut:  Substitut:  Substitut:  Substitut:  NY 11747  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period	Mailing Address PO BOX 1400				
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STEVE J. ISRAEL  Office Sought: House Senate President State: NY District: 03  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  State: District: District: Other (specify) Type	·			Amount of Each Disbursemen	t this Period
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